



10/780,128

TO WHOM IT MAY CONCERN: A PROCEDURE WAS SENT OUT FEBRUARY 10, CERTIFIED MAIL TO YOUR ADDRESS COMMISSIONER FOR PATENT, P.O. BOX 1450, ALEXANDRIA, VA 22313-1450 WITH A \$385.00 CHECK FOR A PATENT, SMALL ENTITY STATUS. THE PROCEDURE PAPERS I SENT IN WERE THE ONES I WAS CORRECTING THAT WAS TRANSFERRED TO ANOTHER SET OF PROCEDURE PAPERS THAT WERE CORRECTED, AND WAS TO BE MAILED IN. IN MY RUSH I SENT IN THE WRONG PAPERS THAT NEEDED CORRECTING. THE RIGHT PAPERS I AM SENDING IN NOW WITH THE GRAMMER AND SPELLING BEING MUCH BETTER, AND THE WORDING PRESENTS THIS PROCEDURE BETTER (BOTH PROCEDURES ARE BASICALLY THE SAME) SO THAT I I WOULD LIKE TO REPLACE THE ONES THAT WERE MAILED TO YOUR OFFICE BY MISTAKE WITH THE ONCE IN FRONT OF YOU NOW. AS I WANT TO PRESENTED MYSELF BETTER. THE TITLE TO MY SUMMITTED PAPERS WERE - PROCEDURE FOR ASTHMATIC, AND OTHER NON-INVASIVE SURGERY FOR BRAIN TUMOR CURES - THAT WAS FILED 02/18/04.# 10/780128 A SLIGHTLY DIFFERENT LETTER WAS MAILED OUT FEBRUARY 11, 2004 TO YOUR DEPARTMENT THAT WAS ADDRESSED TO ANY SUPERVISOR AVAILABLE CONCERNING THIS. I HOPE SOMEONE MADE A NOTE OF THIS. THE CONFIRMATION # I RECIEVED TODAY 3/30/04 WAS 2270 I DONT KNOW IF THEY HAD THIS ALL ALONG, BUT IN ALL THE TIMES I CALLED IT WAS NEVER MENTION. NOW THAT I HAVE THIS # I FEEL SAFE IN SENDING THESE PAPERS IN, SO THEY DON'T GET LOST FOR REPLACEMENT, THESE PAPERS BEING SENT IN HAVE 6 PAGES NOT 5 THAT I COUNTED ON THE WRONG PAPERS SENT IN. SINCERELY YOURS FRANK GULISANO

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*Can you please sent this self
address envelope back to me, informing
me that the first papers were
replaced with what you now have.*

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UTILITY PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 CFR 1.53(b))	Attorney Docket No.	
	First Inventor	FRANK GULISANO
	Title	Procedure for estimating and other non-invasive surgery for brain tumor cure
	Express Mail Label No.	

APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.	ADDRESS TO: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450
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1. ☐ Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)
2. ☒ Applicant claims small entity status.
See 37 CFR 1.27.
3. ☒ Specification [Total Pages 5]
(preferred arrangement set forth below)
 - Descriptive title of the invention
 - Cross Reference to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to sequence listing, a table, or a computer program listing appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
4. ☐ Drawing(s) (35 U.S.C. 113) [Total Sheets _____]
5. Oath or Declaration [Total Sheets _____]
 - a. ☐ Newly executed (original or copy)
 - b. ☐ Copy from a prior application (37 CFR 1.63(d))
(for continuation/divisional with Box 18 completed)
 - i. ☐ **DELETION OF INVENTOR(S)**
Signed statement attached deleting inventor(s) name in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6. ☐ Application Data Sheet. See 37 CFR 1.76

7. ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
 - a. ☐ Computer Readable Form (CRF)
 - b. Specification Sequence Listing on:
 - i. ☐ CD-ROM or CD-R (2 copies); or
 - ii. ☐ Paper
 - c. ☐ Statements verifying identity of above copies

- | ACCOMPANYING APPLICATION PARTS | |
|---|--|
| 9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) | |
| 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement (when there is an assignee) | <input type="checkbox"/> Power of Attorney |
| 11. <input type="checkbox"/> English Translation Document (if applicable) | |
| 12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 | <input type="checkbox"/> Copies of IDS Citations |
| 13. <input type="checkbox"/> Preliminary Amendment | |
| 14. <input type="checkbox"/> Return Receipt Postcard (MPEP 503)
(Should be specifically itemized) | |
| 15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) | |
| 16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. | |
| 17. <input type="checkbox"/> Other: _____ | |

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.: _____

Prior application information: _____ Examiner: _____ Art Unit: _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS			
<input type="checkbox"/> Customer Number: _____	OR <input checked="" type="checkbox"/> Correspondence address below		
Name	FRANK GULISANO		
Address	1212 LORING AVENUE APT 2G		
City	BROOKLYN	N.Y.	State: N.Y.
Country	KINGS	Zip Code	11208-5046
Name (Print/Type)	Signature: Frank Gulisano		Registration No. (Attorney/Agent):
Signature	Date		02/07/04

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is authorized by 37 CFR 1.53(b).



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BACK GROUND AND SUMMARY OF MY PROCEDURE INVENTION

MY NAME IS FRANK GULISANO, A LAYMAN RESIDING IN BROOKLYN. I AM SELF TAUGHT IN MANY WAYS, BESIDES HAVING A REGENTS DIPLOMA. MY CLAIM IS THAT THE MEDICAL PROFESSION IN USING MY PROCEDURE WILL CURE BRAIN TUMORS, AND PERHAPS OTHER BODY TUMORS, OF WHICH I BELIEVE COME IN DIFFERENT FORMS, AND ARE BROUGHT ABOUT BY DEFECTIVE GENES. MY PRECISE PROCEDURE PRESENTED HERE CAN DO THIS WITH OUT INVASIVE SURGERY OR APPLYING RADIOACTIVE MATERIAL, FOR THE PURPOSES OF ELIMINATING SUCH TUMORS WHEN THEY BECOME TROUBLE-SOME ESPECIALLY IF SUCH TUMORS ARE DEATH THREATING TO A PERSON. THERE ARE TIMES WHEN TUMORS CAN NOT BE OPERATED ON WITH OUT KILLING THE PATIENT, THERE BY RESIGNING SUCH A PERSON TO DEATH. MY PROCEDURE CAN SOLVE THIS PROBLEM IF FOLLOW CORRECTLY, TO ITS TIMING, VOLUME, WEIGHT, ITEMS, AND DURATION OF TIME, AS EXPLAINED HERE IN. A BRAIN TUMOR THAT HAS SPREADS SUCH AS A CANCEROUS ONE CAN INFECTED OTHER PARTS OF THE BODY AND SEEMS IMPOSSIBLE TO CURE, HOW EVER I HAVE EXPLAIN HOW THIS CURE CAN COME ABOUT. MOTHER NATURE HAS PROVIDED ME WITH AN EXCELENT WAY TO SUCH CURES, OTHER THAN WHAT IS CONVENTIONAL. THIS WAS DISCOVERED BY ME QUITE BY ACCIDENT IN MY NEED TO FIND SOME ANSWERS BY EXPERIMENTING, DUE TO MY CURIOSITY CONCERNING CERTAIN MATTERS. SUCH PROCEDURE OF MINE IN BRAIN CURES CONSIST OF THE INTAKE OF AIR AND VAPOR FROM ONE OF NATURE'S WONDER DRUGS THAT I DEEM TO BE A LOW RISK UNDER TAKING COUPLED WITH WHAT I CONSIDER A SURE CURE IN PERFORMING ITS INTENDED PURPOSE, IF DONE EXACTLY AS WRITTEN AS I HAVE ACCIDENTLY FOUND IT TO BE SO. WHAT IS USED, WHEN APPLYING PROPER TIMING TO, WHETHER IT BE SUBSTANCE OR EQUIPMENT IS CRUCIAL IN EFFECTING A CURE, WITH THIS PROCEDURE, THAT CAN BRING BENEFITS TO LITERALY MILLIONS OF SUCH SUFFERING PEOPLE, AND TO PREVENT THE LOST OF 5,000 LIVES EACH YEAR TO ASTHMA ATTACKS IN THE UNITED STATES ALONE! HOPEFULLY THIS WILL EXCITE FURTHER STUDIES IN UNCHARTED AREAS OF SCIENCE, IN SAVING OUR MOST PRECIOUS RESOURCES: PEOPLE. I BELIEVE MY PROCEDURAL CURES WILL LOWER OUR GOVERNMENT'S

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EXPENSES OF MEDICAID AND MEDICARE BY THE VERY FACT THAT THERE WILL BE NO CONSTANT RETURN OF SUCH TUMOR RELATED ILLNESSES TO OUR HEALTH INSTITUTIONS. THIS PROCEDURE WAS PRESENTED HERE BY ME ALONE, AS I WAS NOT ABLE TO HIRE A PATENT AGENT FOR ASSISTANCE. I WOULD APPRECIATE ANY HELP YOU CAN PROVIDE ME IN MY QUEST AT THIS POINT IN TIME. THIS IS RELATED TO A PROVISIONAL APPLICATION # 60/509/592 FILING DATE 10/09/03. ON 12/ 05/03 I WAS GRANTED A LICENSE UNDER SECTION 35 USC 184



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PROCEDURE FOR ASTHMATIC, AND OTHER NON- INVASIVE SURGERY FOR BRAIN TUMOR CURES

- I have effected the cure of my asthma that I was born with, which came to an end at approximately 55 years of age, and was done by utilizing mother nature's pure cocain in a free base form, the timing and knowledge of its use is medically crucial. The size of this free base piece that I used many years ago was 1/4 the size of a cardboard match head, matches that one receives with a pack a cigarettes. I recall this weight to be about 1/10 of 100 parts of a gram or 10/100 on a centermeter scale, of pure 84% free base columbian powder cocain. To insure the proper strength dosage is applied per full breath intake once only per session, a new prepared metal screen with a new 1/10 of a gram cocain piece should be installed on this screen per treatment. This needs a very small butane flame to evaporated, as this cocain is now very sensitive to heat. Air is to be drawn through this evaporation for a full deep breath capacity for that person. When the heat is taken away, this piece instantly stops evaporating. Each metal screen must be burned red hot before using for a few seconds to evaporate the industrial chemical residue on it that goes up in a puff of smoke, then the filter is clean to be used. Seeing as each person has a different lung capacity, such person's full air capacity must be determine before time, and the amount of air/cocain mixture used, to equal it in volume and must be deeply inhaled one time only per 1/2 hour, or another predetermined time, as explained below. This volume measurment must be done before time due to the fact that an unconscious patient may not take a full breath while unconscious but take small breaths at the begining of the time settings. The volume of prepared mixed of air and cocain should always be used up, to equal that persons deep intake volume. I recall, this tumor cure took me 16 hours or 32 sessions of 1/2 hour apiece of deep inhaling this free base 1/10 of a gram pure columbian cocain, one after another, non stop after the end of each of the 1/2 hours, as its metabolic rate came to an end at this point, like clock work, each and every time. This might have been over done by me, as I stopped due to fatigue. But this was done for a completly different reason in trying to find out information about a different subject, and I did not realized what I did to myself untill 4 months later, in my not getting any more asthma

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attacks. This took me over a year to figure out what happen. Before starting anything on the patient, they must not have any intake of food for at least 6 hours prior, unless the physician requests more time. The first step after six hours or more being in a calm state while awake is to check their blood until there is a steady normal metabolic rate. The second step is to determine the patients full lung capacity. The third step is to put the patient to sleep for as many hours as is needed, for inhaling air/cocain mixture once only at first, so as to check the patients blood at intervals for signs of when there is a complete metabolic use of this cocain for that person only, this time frame must be noted exactly and the machines used, to calibrated to that time frame for each succeeding full volume of intake of this mixture which is tailored to this patient, so as not to over do this mixture intake or under do it. The fourth step is to continue this procedure until the scanning of the brain shows a decreasing electrical output in a part of the brain as this procedure is continuing, when this brain current stops at any brain point, the tumor was there, and is now dead, but this will take many hours to accomplish. Such tumors can also be located by taging this freebase cocain with radioactive isotopes. The fifth step is to stop ever thing and at this point leave the patient to rest naturally, for as long as is needed for them to wake up, as the brain adjusts itself, and will wake up on its own normally. The original cocain $C_{17}H_{21}NO_4$ is used in snorting, but when free based with ammonia, or baking soda or ether and heated carefully in a cooking glass and worked, it becomes free of its alkoloid base and, is instantly absorbed in the blood, when inhaled, it then breaches the brain barrier in seconds to where the tumor or tumors are located. This amount of alkoloid base is approximately 1/11 of the original amount in weight, and goes into a solution with what you are freebasing it with, so that what is left is 1/11 lighter than what you started with, and can at this point be inhaled and becomes useless in snorting it. It should be noted that cocain is a very corrosive substance to flesh due to its alkoloid content, but when free based this alkoloid is eliminated and the chemical composition of cocain has changed, so much so that tumors have an infinitive attraction to in bringing about its demise. An asthmatic attack is caused by a brain tumor in its realease of an electrical charge which is erattic at its best, as it has no normal order in behavior when some thing sets it off, that can be caused by its internal action alone, or set off with outside stimuli that gets into the blood stream setting this tumor off directly or indirectly. When this

happens the tumor's electrical charge upsets glands it has access to, one in particular whose name and its secretion I do not recall, but this secretion was recently discovered, (due to updated equipment that was then available, which was about 15 years ago) in the blood of people that had asthmatic attacks (no one knew why this gland was doing this, it was just raw findings). This secretion was found to be minute and powerfull and causes the bronchial tubes to constrict and an asthma attacks was imminent. When such bronchia tubes recovered, this person started to breath better. I had good reasons to believe it was a tumor causing this problem all along, in producing an unwanted electrical current to this gland that would cause it to discharge its brew in a sufficient amount in causing an attack, as minute as it was. If a medical scientist had known the underlying reason for such an attack, what could they have done? Besides once an attack occured it was to late to do anything to prevent it. I thought if the electric charge was very strong at times, it would release an unusual amount of the substance mention above and became too much for a person's body to over come in a safe time, and eventually cause death by asphyxiation. (It has been estimated by officials in the know, that approximately 5,000 deaths occure each year in the United States that were asthmatic related). This tumor I believe must be near or connected to the breathing apparatus in complicating things. The reason for this logic, is that tumors that are else where must cause different problems for the body, depending on what net work its hooked up to, and is explained below. The only safe way to kill such tumors malignant or not, curable or not is by my method above, and does not need invasive surgery in doing away with such tumors. Tumors that cause asthmatic attacks or any tumors, I believe, are brought about by defective genes in creating these tumors. If such genes can only be pinpointed! perhaps it can be found in working backwards, from the tumor to the gene,so as to prevent tumors from forming, by studying such genes. Any abnormal cells in the brain, that causes a brain problem is considred a tumor to me and may not be called tumors by the medical profession. This holds true for me for tumors in any part of the body. Pharmaceutical cocain which is man made is harsh and very strong at 100% pure,due to its lack or natural cocain derivitives. This may or may not work in killing such tumors when free based, if not then the derivatives of natural cocaine plays an important role in a free base state in effecting a cure for such tumors. The reason cocaine is the only substance to do the job that I know of is a simple one, it is the

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only substance that can breach the brain barrier where these tumors are located, that are sensitive to cocaine ingredients, that effectively kill these tumors by self destruct with proper timing and duration. When tumors absorb this cocaine, it disrupts its cell chemistry in its greedy need, or use of it as quickly as possible, with no normal restraints, and its intake is over done. To cure tumors by nasal intake, if it can be done with non free base cocaine I believe would destroy your mucous membrane first, and intravenous I would think is too risky. Young abandoned children using cocaine of every form excessively in Peru became deformed, as the brain did not develop right, and could not perform its functions in making healthy organs. Using cocaine excessively or not by anyone, especially such young developing bodies is extremely dangerous in its long time use. This became a very big problem in the country of Peru, so that operations were performed that were simple brain procedures, and were successful on such children, in getting rid of their cocaine desire. This success lasted only 6 months, as the brain part that was worked on, came back and the cocaine lust returned. (This is to show how the brain and cocaine mix over a period of many months or years). This experiment needless to say became a failure. In my procedure it's important that the patient be in a sleeping state so that he or she does not feel anything of this new feeling as it should not be allowed to be dwelled on. On this sleeping patient a brain scan must monitor this brain to check after hours of treatment, for the electrical output of its parts, an EEG (electroencephalograph) can be used along with a CT or MRI for internal brain pictures, before and after. This tumor part of the brain may not be at all detected unless a unusual electrical output is seen, meaning the patient is having an attack, which is not likely to occur while looking. When an electrical output is seen diminishing in a location, then this location is where the tumor is at. Continue the treatment until there is no activity left in this sector and this tumor is dead and will not give the patient any more problems in their life time. Nor can it turn very bad and cause bigger problems as time goes on, which some times is the case. Vital signs must be watched for continuously, while performing this procedure, however nothing is likely to happen even in an uncontrolled environment due to the very tiny cocaine piece used, that lasts for approximately 1/2 hour with no need to give more. If a patient has more than one tumor, you can take care of them, there and then, but better to schedule this for another time, as each tumor's requirements for self destruct is different. If done, this is coined by

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me as a brain sweep, which I suspect had other unusual good end results for me. Because the tumor or tumors takes most of this cocaine, normal cells receive very little if any, and are not harm as this tumor dies. At this point the treatment must stop, when there is no electrical activity left in such a location. I might add that a brain scan can be done on me to locate this small dead area, where I believe my asthmatic tumor lies dead with no electrical activity there. Tumors located in other parts of the brain will cause other abnormalities such as epilepsy with involuntary muscle movements, and so on to other tumors located else where, causing their own unique problems depending on what net work they are connected to when an unwanted electric discharge comes about, which many times is unpredictable as to when it will occur, and some times it may be a fairly constant current, giving that person continuous unwanted movements, all having different medical names for each happening that are caused mostly if not all by tumors. My belief is that most tumors come about, from genetic defects, as do asthmatic ones, and can certainly developed other ways at times, one way is from an auto accident causing injury to the head or the taking into ones body questionable environmental chemicals, etc. The important thing then is to cure these tumors by self destruct, that was discovered by me quite by accident and to finally have put every thing together in my thinking on the subject due to enough layman's knowledge at my disposal, especially on the workings of the body. There is a possibility a cocaine solution can be put on a cancerous body spot and it might die with out using radiation with its bad side affects, if it is accessible. To be sure, a wide internal cancerous spread seems almost hopeless for the time being in curing. However my logic is, if the main ingredients in cocaine that are responsible in killing brain tumors could be isolated, then this can lead to killing cancerous cells metastatically before doing damage to healthy organs, with no mutated changes to such cells as they are stopped cold by self destruct. This to me narrows the time factor in curing such wayward cells as they are especially sensitive to cocaine's ingredients, after all these are tumors even if its just a one cell tumor. A cocaine use here may be different from my brain tumor cure, as it could require isolating chemicals from cocaine in the developing of pills or intervenous of such ingredients with its own time, amount, and duration factors in performing this procedure for a cure. The problem with a cancer cure lied in not knowing what drugs to work with on such tumors and then the constant mutation of such cells

when using new man made drugs that at times just slowed down such tumors, only for them to mutate and continue on as if nothing happen. The only answer seems to be in killing them quickly, with mother nature's wonder drug in a systematic way. Developing only magic bullets from cocain could be elusive at first, after all you are dealing with freebase and then non free base cocain which not only has many different derivitives but every thing can combine and change chemical in various ways for a cure. I am sure in free basing, some chemical changes were made, and may not work on tumors in other parts of the body besides the brain, due to other parts of the body's unique resistance to a free base form. Rest to sure the cure is in cocain one way or another for tumors. To be certain, mother nature knows best in knowing how to make drugs for cures,so much so that Marijuana is legal to use for patients in treating an eye disease called glaucoma by doctors so that the patient does not go blind, might not the same be done with my procedure in saving 5,000 lives a year in the United States alone, from asthmatic attacks that do kill people, not to mention various other tumors that inflicted great sufferings to millions, and often times death, to such people.

SINCERELY YOURS FRANK GULISANO
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F.C.